



## CITY OF HOPEWELL, VIRGINIA

P.O. Box 1604

Hopewell, Virginia 23860

Phone: (804) 541-2237 Fax: (804) 541-2207

Debra Kloske Reason, Master Commissioner of the Revenue



# City of Hopewell Producer's Permit to Sell

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

The above is hereby given permission to sell \_\_\_\_\_

only in the City of Hopewell Virginia from \_\_\_\_\_ until \_\_\_\_\_.

The vehicle that will be used in selling the above named produce is described as follows:

Year: \_\_\_\_\_

Make: \_\_\_\_\_

Tag #: \_\_\_\_\_

VIN: \_\_\_\_\_

\_\_\_\_\_

Debra Kloske Reason  
Commissioner of the Revenue